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Application Number	09/470,874
Filing Date	12/22/1999
First Named Inventor	Marc M. Jalisi
Art Unit	3763
Examiner Name	Mark K. Han
Attorney Docket Number	ACSG 58267 (1700X)

Total Number of Pages in This Submission	12	Attorney Docket No	umber	ACSG 58267 (1700X)				
ENCLOSURES (Check all that apply)								
Fee Transmittal Form	Drawing(	s)		After Allowance Communication to TC				
Fee Attached	Licensing	-related Papers		Appeal Communication to Board of Appeals and Interferences				
Amendment / Reply	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After Final		o Convert to a al Application		Proprietary Information				
Affidavits/declaration(s)		Attorney, Revocation of Correspondence Add	dress	Status Letter				
Extension of Time Request	Terminal	Disclaimer		Other Enclosure(s) (please identify below):				
Express Abandonment Request	Request	for Refund		Postcard; Pre-Appeal Brief Request for Review w/ Exhibits				
Information Disclosure Statement		nber of CD(s)  Landscape Table on C						
Certified Copy of Priority Document(s)	Remarks							
Response to Missing Parts/ Incomplete Application		CUSTO	MER NO	. 24201				
Reply to Missing Parts under 37 CFR 1.52 or 1.53								
SIGNATUR	E OF APPLICAN	IT, ATTORNEY, OF	R AGENT					
Firm Name FULWIDER PATTO	N LLP							
Signature .	11							
Printed name John V. Hanley	7							
Date April 7, 2006		·	Reg. No.	38,171				

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APR 1 0 2006 PTO/SB/17 (01-06)

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Fees pursuant to the Conson propriations Act, 2005 (H.R. 4818).			Complete if Known					
•		Application Number	09/470,8	09/470,874				
FEE TRANSMITTAL			Filing Date	12/22/19	12/22/1999			
for FY 2006			First Named Inventor	Marc M	. Jalisi			
				Examiner Name	Mark K	Mark K. Han		
Applicant claims small er	ntity status.	See 37 CFR 1.	27	Art Unit	3763			
TOTAL AMOUNT OF PA	YMENT	(\$) \$5	500.00	Attorney Docket No.	ACSG 5	8267 (1700X)		
METHOD OF PAYMEN	T (check all	that apply)						
Check Credit C	ard	Money Order	☐ Non	e Other (pleas	se identify):			
Deposit Account Depos	sit Account N	Number:	06-2425	Deposit Accou	nt Name:	Fulwide	r Patton LLP	
For the above-identified d	eposit accoun	nt, the Director is	hereby au	thorized to: (check all that a	apply)			
Charge fe	ee(s) indicated	i below		Charge fee(s	) indicated t	below, except for	the filing fee	
Charge a	ny additional f	ee(s) or any und	erpayment	s of Credit any ov	erpayments	;		
WARNING: Information on the card information and authorities	der 37 CFR 1. nis form may zation on PT	become publi	c. Credit	card information should	not be inc	luded on this f	orm. Provide credit	
FEE CALCULATION (A	II the fees	below are o	lue upo	n filing or may be s	ubject to	a surcharg	je.)	
1. BASIC FILING, SEARC								
	FILING F			CH FEES	EXAMINA <sup>-</sup>	TION FEES		
A	Foo (\$)	Small Entity	Ecc (\$)	Small Entity	Eee /\$\	Small Entity	Fees Paid(\$)	
Application Type	Fee (\$) 300	<u>Fee (\$)</u> 150	Fee (\$) 500	<u>Fee (\$)</u> 250	<u>Fee (\$)</u> 200	<u>Fee (\$)</u> 100	rees raiu(\$)	
Utility	200	100	100	50	130	65		
Design	200	100	300	150	160	80		
Plant			500	250	600	300		
Reissue	300	150		0	0	0		
Provisional	200	100	0	U	U	U		
2. EXCESS CLAIM FEES						E- (A)	Small Entity	
Fee Description	- <b></b>					<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25	
Each claim over 20 (including	•					200	100	
Each independent claim ove	r 3 (includin	y Keissues)				360	180	
Multiple dependent claims							ependent Claims	
Total Claims	Extra Claim	s <u>Fee (\$)</u>		Fee Paid (\$)		Fee (\$)	Fee Paid (\$)	
20 or HP =			50.00	= \$0.00				
HP = highest number of total cl	aims paid for,	if greater than 2	0.					
Indep. Claims - 3 or HP =	Extra Claim		OO OO :	<u>Fee Paid (\$)</u> = \$0.00				
- 3 or HP = x \$200.00 = \$0.00 HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Shee			each additional 50 or fract			Fee Paid (\$)	
- 100 =	0	/50 _	<u> </u>	(round <b>up</b> to a who	ole number	) x <u>\$250.00</u>	= \$0.00	
4. OTHER FEE(S)  Non-English specification. \$130 fee (no small entity discount)								
Non-English specification, Other (e.g., late filing surcha	•	-	iiscourit)				\$500.00	
SUBMITTED BY								

SUBMITTED BY					
Signature	and by	Registration No. (Attorney/Agent)	38,171	Telephone	310-824-5555
Name (Print/Type)	John V. Ha	Date	April 7, 2006		

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